

# Lebanon VAMC

N E W S L E T T E R



Excellence in Care



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## State of the Art in the Heart of the State

**THE LEBANON VA MEDICAL CENTER** was opened in 1947. Since then, many transformations have taken place to make it the thriving hospital it is today. From the 1950s through the 1970s, the Lebanon VA was a rehabilitative and psychiatric facility housing thousands of Veterans for long-term care. With the advent of technology and improved methods of transportation, like many other community facilities, medical care has shifted from inpatient stays to an outpatient focus.

The Lebanon VA is a state-of-the art facility with eight major buildings, employs over 1,300 staff, cares for over 44,000 Veterans annually, performs 4,000 surgical cases per year, and maintains 215 acres of land. This is not the same hospital from 1947!

And, more changes are happening...an ambulatory surgery building, behavioral health complex and laboratory will all be completed in 2013. All of these projects are to better serve the Veterans who dedicated their lives to protecting our liberties and freedoms!



**VA**  
HEALTH  
CARE

Defining  
**EXCELLENCE**  
in the 21st Century



## Surgical Services

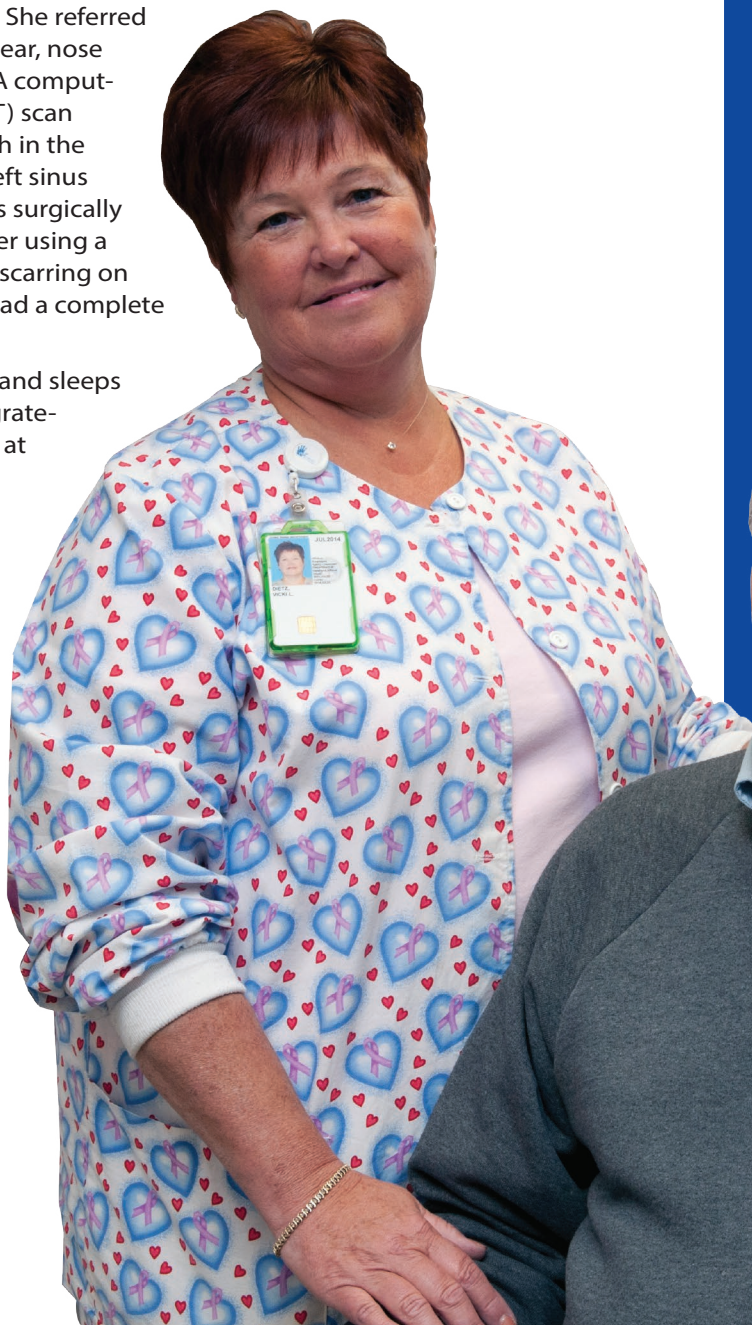
**MORE THAN 4,000 SURGICAL CASES** are performed every year at the Lebanon VA Medical Center. These surgeries range from orthopedic knee and hip replacements to delicate plastic surgery. This past year, US Army Veteran George Pedia was the beneficiary of the skill of one of the VA's surgeons, Dr. Robert Boucher.

George has always been in good health except for some lingering sinus issues. In fact, despite the efforts of several of his Army buddies, who were very happy with their treatment at Lebanon, George always put off enrolling in VA health care. It wasn't until he retired, that those very same buddies convinced him he shouldn't wait until something happened to him to sign up. So the 1960 draftee stepped forward and enrolled..."I couldn't believe how quick and easy it was."

At Christmas dinner in 2011, George's sister noticed that he seemed to be holding his breath with each bite of the holiday meal. When she asked him about it, he told her he had a sinus infection and was having a little trouble breathing but not to worry. Six months later, when the suspected infection still had not cleared, George arranged an appointment with his primary care provider. She referred him to Dr. Boucher, an ear, nose and throat specialist. A computerized tomography (CT) scan revealed a large growth in the former artilleryman's left sinus cavity. The growth was surgically removed by Dr. Boucher using a procedure that left no scarring on George's face and he had a complete recovery.

Now George breathes and sleeps better. He says, "I am grateful to the great people at the VA, especially Dr. Boucher. I never miss appointments but for some reason, I missed my follow up appointment after the surgery. Dr. Boucher took the time to call me personally and make sure I was okay. I was really impressed. He is a real sincere concerned gentleman. Everyone here treats you great. I wish I would have come here sooner."

*Nurse Vicky Dietz and  
Veteran George Pedia*



### Facts:

**4,000** surgical cases  
are performed annually

The Lebanon VA Medical Center  
has **3** operating rooms

Surgeries performed include:

- Bronchoscopy
- ENT
- Dental
- Endoscopy/Colonoscopy
- General Surgery
- Ophthalmology
- Orthopedic
- Plastic Surgery
- Podiatry
- Urology







## Secure Messaging

**HOW WOULD YOU LIKE TO "EMAIL" YOUR DOCTOR** at any hour of the day and get a personal response quickly from someone who knows and works with you concerning your health care? Well at the VA, you can! Secure Messaging, a part of the MyHealtheVet program at [www.myhealth.va.gov](http://www.myhealth.va.gov), gives the ability to email your primary, specialty and surgical care team any question about your care. Your email is forwarded to the appropriate member of the team and your question answered. Whether it's regarding a prescription, an appointment or medical question, your team is here to help!

To sign up, visit [www.myhealth.va.gov](http://www.myhealth.va.gov)

For questions, your MyHealtheVet point of contact at the Lebanon VA Medical Center is Jan Falk, 717-272-6621, ext. 5737 or 1-800-409-8771, ext. 5737.

Ruth, Bob, Jan, Stephanie and Lisa are the MyHealtheVet team waiting to help you enroll with MyHealtheVet and secure messaging. Look for any member of the team at the Lebanon facility or any of the community based outpatient clinics.



## Electronic Health Record

**VISTA (VETERANS HEALTH INFORMATION SYSTEMS AND TECHNOLOGY ARCHITECTURE)** is a health information system used throughout the Veterans Health Administration (VHA) in hundreds of hospitals, clinics, and nursing homes. Health care staff use CPRS (Computerized Patient Record System), a Windows-based interface, to access medical information on Veterans locally and from other VA Medical Centers across the nation. CPRS has been the model for many private sector efforts to create their own health information systems since 1998 and it is in use in other countries.

Even though development of this system began early in the 1980s, it is still on the cutting edge of healthcare technology. Its most unique feature is the ability for staff to access health record information on Veterans from any VHA facility where they have received care, anywhere in the country. VHA is also a leader in web-based personal health records with MyHealtheVet, a website that provides Veterans preventive health information, allows them to refill medications, check appointments, view lab results, and maintain and record their own health information.

The VistA health care record has been widely credited for reforming the VA health care system. The results have spurred an impetus to adopt electronic medical records nationwide. Because of the success of these programs, a national move to standardize healthcare data transmission across the country was started.

As health care providers gear up for a digital overhaul, they could learn important lessons from an early innovator in the field—Veterans hospitals.<sup>1</sup>

<sup>1</sup>Wall Street Journal <http://online.wsj.com/article/SB10001424052970204488304574428750133812262.html>



*Veteran Craig Johnson and Andrea Raker, Suicide Prevention Coordinator*

### FACTS:

People experience emotional and mental health crises in response to a wide range of situations—from difficulties in their personal relationships to the loss of a job. For Veterans, these crises can be heightened by their experiences during military service. When emotional issues reach a crisis point, it's time to call on the Veterans Crisis Line for support.

Since its launch in 2007, the Veterans Crisis Line has answered more than 400,000 calls and made more than 14,000 life-saving rescues.

Sometimes a crisis may involve thoughts of suicide. Learn to recognize these warning signs:

- Hopelessness, feeling like there's no way out
- Anxiety, agitation, sleeplessness, or mood swings
- Feeling like there is no reason to live
- Rage or anger
- Engaging in risky activities without thinking
- Increasing alcohol or drug abuse
- Withdrawing from family and friends

### The following signs require immediate attention:

- Thinking about hurting or killing yourself
- Looking for ways to kill yourself
- Talking about death, dying, or suicide
- Self-destructive behavior such as drug abuse, weapons abuse, etc.

## Crisis Intervention

**NON-COMMISSIONED OFFICERS (NCOs) ARE THE BACKBONE OF THE MILITARY.** They get the job done and rarely take the credit. They work hard. They're tough and tenacious. They take great pride in being leaders and it's hard, very hard to admit when they need help. It takes a lot of courage to say, "help me."

So it was very difficult when Craig Johnson left the Army after 26 years of service. A decorated soldier, his identity and sense of purpose shifted moving into the civilian world. His thinking changed after he sent out resume after resume only to receive rejection letters or no response at all. Bills began to stack up. The financial strains began to lead to other strains in his life. A vicious downward spiral pulled him into a dangerous whirlpool of darkness. He began to think that, "my family would be better off without me." So he tried to stop the pain with a bottle of pills.

Fortunately, the normally successful NCO was not successful ending the pain by his own hand. He entered Lebanon VA Medical Center's inpatient treatment program and then transferred to outpatient treatment. "The staff is truly outstanding," Craig says, "They treat you with respect. I'm not alone. There are others with me."

The former NCO is especially grateful for Andrea Raker, LCSW and her Suicide Prevention team. Now the logistics specialist is making things happen as a volunteer at a local school and with the American Legion. "Tell soldiers there is a place where they can get help. Tell them, here's where you can get help."

For more information visit...

<http://www.mentalhealth.va.gov/>

<http://www.afterdeployment.org/>

**1-800-273-8255 PRESS 1**



# Home Based Primary Care

**HOME BASED PRIMARY CARE (HBPC)** is a program designed to treat a unique Veteran population...the housebound and chronically ill man or woman with multiple complex medical issues. When the Veterans Health Administration (VHA) began to explore better ways to serve these Veterans, the question became, "how is it best to care for this aging population, while still allowing them their independence?" The answer was HBPC.

Veterans in HBPC have a primary care interdisciplinary team consisting of a provider (MD, PA or NP), nurse, social worker, psychologist, rehabilitative therapist, dietician and a pharmacy consultant. Members of the team visit the patient in the Veteran's home to perform routine primary care procedures such as blood pressure checks, physical examinations, injections and other medical necessities.

HBPC was started at the Lebanon VA in 2004. There are approximately 280 patients in the program at any given time.

The HBPC program has been a success in avoiding recurrent inpatient stays, avoiding no-show appointments and the main goal...keeping the Veteran patient in his or her home. If you are interested in learning more about HBPC, please call 717-272-6621, ext. 4406 or 4709.

If you know a Veteran who would benefit from HBPC services, please call 717-272-6621, ext 4406 or 4709.



*Martin Nourie served our country in the Navy during the Vietnam conflict. As a result of his service, Martin lost both his feet and suffers from PTSD (Post-Traumatic Stress Disorder). Due to his multiple medical conditions and his inability to travel, he and his wife greatly benefit from the home visits by his primary care team and his long-time nurse, Carmen Hoffman. Mr. Nourie states "I have known Carmen over 10 years and this is a wonderful program!"*



Robert Phillips

### TELEHEALTH IN VHA TAKES PLACE IN 3 WAYS:

#### Clinical Video Telehealth (CVT)

Clinical Video Telehealth (CVT) is defined as the use of real-time interactive video conferencing, sometimes with supportive peripheral technologies, to assess, treat and provide care to a patient remotely. Typically, CVT links the patient(s) at a clinic to the provider(s) at another location.

#### Home Telehealth

Home Telehealth (HT) is defined as a program into which Veterans are enrolled that applies care and case management principles to coordinate care using health informatics, disease management and Home Telehealth technologies.

#### Store-and-Forward Telehealth

Store and Forward Telehealth (SFT) is defined as the use of technologies to acquire and store clinical information (e.g. data, image, sound and video) that is then forwarded to or retrieved by a provider at another location for clinical evaluation. SFT in VA uses a clinical consult pathway and VistA Imaging in conjunction with TeleReader to provide screening, diagnostic and treatment services where time and/or distance separate the patient and provider.

Telehealth monitors began being placed in patient's homes in 2004 to monitor blood pressure, insulin levels, mood and more. These monitors provide a direct link to the patient no matter how much distance is between the patient and the VA hospital.

## TeleHealth

**HAVING SPENT TWENTY YEARS ON ACTIVE DUTY** in the United States Army, Robert Phillips had gotten a lot of exposure to the sun, living and working in the outdoors. He also had used various insecticides the military had provided him to keep bugs at bay. So he never gave a lot of thought to a small spot on his face. It had been there for years. Some caregivers he saw thought it was simply an age spot. But when it began to change color, size and shape, Bob became concerned. He went to the York Community Based Outpatient Clinic (CBOC) to have it examined by his primary care provider. What he did not know, is that his primary care provider could offer him an immediate consultation through what is called, telemedicine or in this case specifically, tele-dermatology.

High definition pictures were taken of the spot and then electronically sent to a specialist at the Wilmington VA Medical Center. An examination of the photos suggested that the spot should be removed. Surgery was scheduled and completed. When the tissue sample tested positive for melanoma, the former artilleryman, was relieved that the VA acted so quickly. Robert and his family were thrilled with Lebanon VA's cutting edge technology, rapid response and compassionate care.

Reflecting on his experience at Lebanon, Robert says, "this is a top notch place. I would recommend the VA to everyone. There are so many specialties here. You should see it for yourself and explore your options."

To provide the right care in the right place at the right time through the effective, cost-effective and appropriate use of health information and telecommunications technologies.





## Clinical Video Telehealth

**IN 2009, VIDEO APPOINTMENTS WERE IMPLEMENTED** and reduced the need for a patient to drive to the Lebanon facility. What a remarkable advancement in patient care!

### FACTS:

Video clinic and telehealth options are available in the following specialties:

- Bariatric
- Behavioral Health
- Cardiac Risk Reduction
- Dermatology
- Diabetes Education
- Home Oxygen
- Neurology
- Pharmacy
- Physical Therapy/Rehabilitative Medicine
- Smoking cessation
- Social Work Service
- Teleretinal Digital Scans
- VISOR/VIST

In FY12, over 850 patients were seen by their provider via video appointment.

There is a 96% satisfaction rate in the use of clinical video technology.

*Photo: Group at Lebanon VAMC participating in a counseling session with Staff Psychologist Dr. David Zehrung, who is at the Camp Hill Community Based Outpatient Clinic.*

- THE TV
1. We admitted we were powerless before sin, before Satan, and before the power of sin.
  2. Came to believe that a Power greater than ourselves could restore us to sanity.
  3. Made a decision to turn our will and our lives over to the care of God as we understood Him.
  4. Made a searching and fearless moral inventory of ourselves.
  5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
  6. Were entirely ready to have God remove all our defects which resulted from all past sins, present sins, and sins yet to come.
  7. Humbly asked Him to remove our defects and to create in our hearts the right to do His will in all our affairs.
  8. Made a list of all persons we had harmed, and made amends to them.
  9. Made direct amends to such people wherever possible, when to do so would injure them no more.
  10. Continued to take personal inventory and promptly admitted it.
  11. Sought through prayer and meditation to contact with God as we understood Him, and to carry this message to alcoholics who believe in God and themselves.





Long time volunteer Stanley Templin visits with Veteran Janet Cochran. Stanley began volunteering in 2007 and has logged over 800 volunteer hours on the Hospice Unit. Stanley provides the most beneficial customer service component of the volunteer program, the one-on-one interpersonal contacts with the Veterans. What a blessing he is to Veterans at the Lebanon VA Medical Center!



## No Veteran Dies Alone

**NO ONE IS BORN ALONE** and in the best of circumstances, no one dies alone. Yet, from time to time, terminally ill patients come to the hospital who have neither family nor close friends to be with them as they near the end of life.

No Veteran Dies Alone (NVDA) provides a reassuring presence to dying Veterans who would otherwise be alone. With the support of nursing staff and trained volunteers, this program provides Veterans the most valuable of human gifts: human presence during this most unique time. Volunteers in the NVDA program share their caring concern with Veterans at the Lebanon VA Medical Center's Hospice Unit through their powerful presence at the bedside when family is not available.

Lebanon is one of 15 VA facilities with a NVDA program. More facilities are following Lebanon's path and starting a program of their own.

**Would you be  
interested in being  
a No Veteran Dies  
Alone Volunteer?**

**Call the Palliative  
Care Coordinator at  
717-272-6621 x3811**



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*The Best Employees Anywhere... The Best Care Anywhere*

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